Effective January 1, 2003										10/623,321					
Γ		CLAIMS									53	6-0	2//		
r	FOTAL CLAIM			mn 1)		(Column 2)			SMALL ENTITY TYPE			OTHER THAN			
#-		16	16					T	FEE	7	PATE	FEE			
Ľ	FOR		NUMBI	NUMBER FILED		NUMBER EXTRA		BASIC F	EE	375.00		BASIC FE			
Ľ	OTAL CHARG	EABLE CLAIMS	16-	/6_ minus 20=		·d		X\$ 9.		···	1				
1	DEPENDENT	2-	2 - minus 3 =		or ·			+		OR		ļ			
М	ULTIPLE DEP	NDENT CLAIM	PRESENT	. /	90			X42-			OR	X84≈	ļ		
	If the difference	e in column 1 is	s less than	less than zero, enter "0" in column 2			•	+140=	1		OR	+280=			
								TOTAL	E	32610	D R	TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL EN													THAN		
A		CLAIMS REMAINING		HIGH	ST	(Column 3)	1 1	SMAL			OR I	SMALL			
		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	Īπ	ADDI- IONAL		RATE	ADDI- TIONAL		
AMENDMENT	Total	. 43	Minus	PAID		-23			┿	FEE			FEE		
MEN	Independent	1. 5	Minus	3		= 2		X\$ 9=	12	07	OR	X\$18=			
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	uldoy	•	•	·			L .	TOTAL DOIT, FEE			OR A	TOTAL			
	11(8[04	(Column 1)	•	(Colum		(Column 3)		DD11. 1 CE			•	ODIT. FEE			
AMENDMENT B		REMAINING AFTER		HIGHE NUMBI	ER	PRESENT		RATE		ADDI-	ſ		ADDI-		
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Application or Docket Number